

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
Norwood for Congress

A. Full Name (Last, First, Middle Initial) James Walsh For Congress		Transaction ID: 61205.E7618 Date of Disbursement <div> <div>11</div> <div>07</div> <div>2006</div> </div>	
Mailing Address PO Box 1974		Amount of Each Disbursement this Period <div>2000.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Syracuse	State NY		Zip Code 13201-
Purpose of Disbursement CONTRIBUTION FOR NY-25 HOUSE			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
B. Full Name (Last, First, Middle Initial) Jeannette Schmidt For Congress		Transaction ID: 61205.E7617 Date of Disbursement <div> <div>11</div> <div>07</div> <div>2006</div> </div>	
Mailing Address 8280 Montgomery Rd, Suite 204		Amount of Each Disbursement this Period <div>2000.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Cincinnati	State OH		Zip Code 45236-
Purpose of Disbursement CONTRIBUTION FOR OH-02			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
C. Full Name (Last, First, Middle Initial) Richard Pombo For Congress		Transaction ID: 61205.E7616 Date of Disbursement <div> <div>11</div> <div>07</div> <div>2006</div> </div>	
Mailing Address 2150 Rover Plaza Dr. #150		Amount of Each Disbursement this Period <div>2000.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Sacramento	State CA		Zip Code 95833-
Purpose of Disbursement CONTRIBUTION TO CA-11 HOUSE			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)